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# Identity formation and strategy development in overlapping institutional fields

# Different entry & alignment strategies of regional organizations of care farms into the healthcare domain

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## Abstract

**Purpose** – Care farming is an underexplored example of agricultural diversification. In their process of diversification, care farmers are newcomers to the healthcare sector, facing high entry barriers and lacking the skills required to build a solid and legitimate presence in this new domain. Changes in the care regime have provided opportunities for new players, like regional organizations of care farmers, to gain access to care budgets. The purpose of this paper is to describe and analyze how strategies designed to establish regional organizations of care farms with similar access to institutional resources unfold and are translated into entrepreneurial behavior, organizational identity and legitimacy, and help provide access to care budgets.

**Design/methodology/approach** – Using entrepreneurship, identity formation and legitimacy building as guiding concepts, the authors interviewed stakeholders and analyzed activities and documents to gain a broad perspective with regard to the organizations, skills and activities.

**Findings** – The authors identified two types of regional care farm organizations: a cooperative and a corporate type. While the corporate type clearly exhibited entrepreneurial behavior, leading to a trustful and appealing organizational identity, substantial fund-raising and an early manifestation of institutional and innovative legitimacy in the care sector, the cooperative type initially lacked entrepreneurial agency, which in turn led to a lack of legitimacy and a slow development toward a more professional market-oriented organization. Manifesting entrepreneurial behavior and strategically aligning the healthcare and agricultural sectors, and building up both institutional and innovative legitimacy in the care sector proved to be crucial to the successful development of regional organizations of care farms. This study contributes to existing literature by exploring relationships between entrepreneurial and institutional strategies, legitimacy, organizational identity and logics.

**Originality/value** – This study contributes to the literature by exploring how in times with changes in institutional logics, strategies to establish new organizations unfold. The authors have shown how differences in strategy to establish new organizations with similar access to institutional resources unfold and are translated into diverging organizational identities and degrees of legitimacy. Entrepreneurial behavior is the key to create a trustful and appealing identity and innovative and institutional legitimacy which is important for providing access to an institutionalized sector.

**Keywords** Organizational identity, Legitimacy, Agricultural diversification, Care farming, Entrepreneurial strategies

Paper type Research paper

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## 1. Introduction

Agriculture in Western Europe is undergoing significant changes (van Huvlenbroek and Durand, 2003), and increasing pressure on the agricultural sector and changing demands from society have changed the focus of an increasing number of farmers and drawn attention to diversification on farms (Clark, 2009; Meerburg et al., 2009). Around the core of agricultural production, additional activities and business have been initiated, like recreation, food processing, nature, landscape, water and energy services (Maye et al., 2009; Meerburg et al., 2009). Diversifying farmers should be viewed as rural entrepreneurs (Durand and van Huvlenbroeck, 2003). They require new skills and knowledge that are often not readily provided by the traditional agricultural support systems (Renting et al., 2008). At the same time, health and social care practices and policies are also changing in Western Europe. Important developments are the deinstitutionalization, socialization and liberalization of care, and the empowerment of clients (Alter and Hage, 1993; Beemer et al., 2007). Healthcare policies in various countries are aimed at promoting "integrated care," which involves cooperation between actors designed to cover the entire spectrum of health and healthcare-related social care (van Raak, 2010). Collaboration and cross-sector social partnerships are driven by complex client needs and used as a way to address intricate social issues that exceed the management ability of any single organization, with the aim of creating a more effective and efficient social service system (Bunger, 2010). These developments provide opportunities for the development of innovative care services.

In this paper an underexplored example of innovative diversification in agriculture and deinstitutionalization of the care sector, namely, care farming will be discussed. Care farms combine agricultural production with the provision of health and social services (Hassink and van Dijk, 2006), providing day care, assisted workplaces and/or residential places to clients with a variety of disabilities (Elings and Hassink, 2008). The combination of a personal and dedicated attitude on the part of the farmer or, more often, a farming couple, the performance of useful activities and an informal and open setting within a green environment, make care farms appealing facilities for various client groups (Hassink et al., 2010). Care farms have been described as innovative examples of community-based services that contribute to the desired deinstitutionalization and socialization of care and the empowerment of clients (Hassink *et al.*, 2010). While care farming has now spread to many European countries (Hassink and van Dijk, 2006; Hine et al., 2008; Di Iacovo and O'Connor, 2009), we focus on the Netherlands, one of the pioneering countries in this area (Di Iacovo and O'Connor, 2009). The number of care farms in the Netherlands has increased rapidly, from 75 in 1998 to more than 1,000 in 2010 (www.landbouwzorg.nl). In 2012, care farms in the Netherlands catered to 15,000 clients (Ernst and Young, 2012). Target groups include people with mental illness, intellectual disabilities, dementia and addiction, children with special needs and problem youths (Hassink et al., 2007). The aim of this paper is to examine how strategies designed to establish regional organizations of care farms with similar access to institutional resources unfold are translated into entrepreneurial behavior, while also giving rise to organizational identity formation and legitimacy building.

From 1995 onwards, care services provided by care farms could only be funded within the framework of the AWBZ, the collective health insurance for the costs of long-term care in the Netherlands. Care services were only covered when provided by institutions with an AWBZ accreditation (formal status of a reimbursable care provision). In the last decade, the liberalization of the care sector has offered

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opportunities to new suppliers to obtain an AWBZ accreditation. Many care farmers are not recognized as official AWBZ-accredited care institutions and depend on the willingness and collaboration of accredited care institutions for the payment of care services. As such, innovative practices, like care farms, are not sufficiently supported by existing structures and regulations. The challenge is to generate legitimacy in the care sector for this new service and obtain sufficient additional income. Being connected and aligned institutionally and discursively with the care sector is crucial to the development of the care services on farms. Many farmers do not have the skills and contacts needed to connect to the care sector (Hassink *et al.*, 2014; Seuneke et al., 2013). Collaboration at a regional level may help care farmers create and improve business opportunities in the care sector. In different regions, care farmers recognized that liberalization offered unique opportunities to solve the major problem of gaining access to care sector budgets. They realized that, to obtain an AWBZ accreditation, they had to collaborate, because funding agencies were not willing to negotiate with hundreds of individual care farmers. In different regions, new organizations of care farmers opted in favor of a collective AWBZ accreditation, which allowed them to negotiate with medical insurance companies about care budgets as official care institutions.

When analyzing the development of regional organizations of care farms the challenges related to agricultural diversification are essential backdrops. Farmers often lack the entrepreneurial competences and dedicated knowledge needed to innovate (Pyysiäinen et al., 2006; Seuneke et al., 2013). This is especially a constraint when it comes to realizing radically new types of businesses, like care farms in the interorganizational setting with which farmers are faced (Batterink *et al.*, 2010). To provide care services, farmers have to connect with and operate in the care sector. Some farmers will not feel able or comfortable to operate in this non-farming environment and will consequently face institutional barriers (Seuneke et al., 2013). Traditional farming institutions rooted in the agricultural sector are ill-prepared for this boundary-crossing task (Clark, 2009). Regional organizations of care farms can help farmers connect to the care sector and gain access to care budgets. Regional organizations can apply different strategies to create legitimacy and overcome institutional constraints (Maguire *et al.*, 2004). The regional organizations of care farms developed in times of change in institutional logics in both the agricultural and the health care sector. Such turbulent times generally create openness for new rules and alternative logics (Skelcher and Smith, 2015). Thus far, few studies have examined opportunities for entrepreneurial activity in times of institutional change (Sine and David, 2003). How organizations cope with plural logics and how their identity affects their behavior is as yet poorly understood (Kodeih and Greenwood, 2014).

## 2. Theoretical framework

We examine how two different strategies designed to establish regional organizations of care farms with similar access to institutional resources unfold and analyze how differences in strategy affects organizational identity, legitimacy and access to budgets of the care sector within a context of institutional change, like deinstitutionalization, socialization, liberalization of the care sector and empowerment of clients. In such turbulent times, there is room for innovative responses drawing on existing and new institutional logics (Skelcher and Smith, 2015) and alternative voices may be heard (Sundin and Tillmar, 2008). As newcomers, regional organizations of care farms may have a lack of legitimacy, as they have no solid track records and stakeholders do not

know whether or not they are trustworthy (Aldrich and Fiol, 1994; De Clercq and Voronov, 2009). New organizations can use different strategies, like framing, to create legitimacy and sense-giving, aggregating or combining of resources and actors to overcome institutional constraints (Maguire *et al.*, 2004). They may also connect strategically to diverse ideas, sources for legitimacy and (financial, knowledge-related and other) resources from their context (Hung and Whittington, 2011).

The identity of an organization can influence its response to institutional demands and multiple logics (Kodeih and Greenwood, 2014). Organizational identity emerges from the interaction, negotiation and shared sense-making processes (Weick, 1995). Identity is a process of becoming (Tsoukas and Chia, 2002) and can change over time through interaction with outsiders and insiders (Gioia et al., 2000; Clegg et al., 2007). Organizational identity is a strategic performance, because it is legitimated with the particular intention of developing standards and structures that will enable the market to be created and exploited (Clegg *et al.*, 2007). The relationship between strategy and identity is recursive where strategy influences identity while at the same time identity influences the strategy of an organization. An organization may encounter institutional resistance when its identity is inconsistent with institutional prescriptions (Gioia *et al.*, 2013; Kodeih and Greenwood, 2014). A significant aspect of organizational identity can be the claim of status or prestige relative to others (Navis and Glynn, 2010). Institutional context and identity are related through institution building, as the core of a strategy it is to be understood as an interplay between agentic orientation, social skills and context (Edwards and Jones, 2008). Context simultaneously provides individuals with entrepreneurial opportunities and sets boundaries to their actions and can be social, spatial and institutional in nature (Welter, 2011).

Legitimation is the process through which newcomers are embedded within the existing assumptions of the area in which they want to operate (Vaara *et al.*, 2006). Legitimacy is a social construct: it reflects congruence between the activities of newcomers and the shared beliefs of incumbents. Being recognized as legitimate by incumbents is a crucial element in whether or not newcomers will be able to succeed (Aldrich and Fiol, 1994). The care sector is a highly institutionalized sector that restricts access to funding to organizations that meet strict quality-related and administrative requirements, which is why it is not surprising that a major problem for newcomers, like care farmers, is to obtain adequate financing for the services they provide (Hassink *et al.*, 2007). The challenge is to develop a professional organizational identity that is consistent with institutional prescriptions and a prestige relative to others. Organizational literature identifies a number of organizational attributes that are important in this respect. Recruiting the appropriate people, building an effective organization and using an adequate business model are crucial success factors (Stinchcombe, 1965; Douglas and Fredendall, 2004). New organizations can attain legitimacy through a combination of copying the characteristics of established organizations (institutional legitimacy) and innovative behavior, in an attempt to manipulate the perceptions of external organizations or the environment (innovative legitimacy; De Clercq and Voronov, 2009). Institutional legitimacy is gained when newcomers comply with particular area-specific assumptions about how participants in that area are expected to operate. Innovative legitimacy is gained when newcomers challenge an area's existing order and bring something new to the sector. We can conclude that newcomers, like the organizations of care farms, should fit in and stand out at the same time. To do so, they should understand the political process through which their actions become classified by incumbents as either fitting in or standing out.

Initiators of regional organizations of care farms can be considered institutional entrepreneurs combining entrepreneurship and an entrepreneurial orientation with institutional work. Entrepreneurship and institutional tasks are two distinct literatures (Tolbert *et al.*, 2011) that can benefit from each other (Phillips and Tracey, 2007). Institutional entrepreneurship bridges aspects of institutional logics, focussing on continuity, and entrepreneurship, focussing on change (Garud *et al.*, 2007). Although entrepreneurship has largely been ignored in institutional theory, it adds an important dimension (Phillips and Tracey, 2007). The entrepreneurial dimension involves the identification and exploitation of opportunities (Shane and Venkataraman, 2000) and the development of ideas into valuable business propositions and pulling resources together (Anderson and Jack, 2000). Institutional tasks in entrepreneurship involve creating new institutions or the transforming existing ones, and changing particular institutional arrangements, as is the case with the establishment of regional organizations of care farms (Maguire *et al.*, 2004; Levy and Scully, 2007). Institutional entrepreneurs create standards, models, scripts and patterns of behavior that are consistent with their identity and interests, and establish them as legitimate standard to others (DiMaggio, 1988). Central issues in institutional entrepreneurship are dealing with field structure and power and developing legitimacy. Literature suggests that having a complex set of skills is essential for institutional entrepreneurs, including cultural/cognitive skills like framing and persuading (Rao, 1998), procedural and technical skills (Strang and Meyer, 1993) and political and interactive skills (DiMaggio, 1988). Because they can rarely change institutions on their own, institutional entrepreneurs must mobilize allies (Greenwood et al., 2002), develop alliances and work together with others (Fligstein, 2001).

A crucial element in the entrepreneurial process and strategy is being part of an adequate network structure in a particular sector or field. Newcomers in the care sector. like the care farm initiatives, benefit from becoming embedded in the care sector, as that provides them with intimate knowledge, contacts, sources of advice, resources, information, support and legitimacy (Anderson and Jack, 2002; Elfring and Hulsink, 2003). The level of embeddedness is the nature, depth and extent of the individual's ties to the network (Uzzi, 1997; Dacin *et al.*, 1999). Thus, network orchestration becomes a key strategic activity: actions designed to create value with and extract value from the network. Network membership, network structure and network position are important aspects of designing a network (Dhanaraj and Parkhe, 2006). For regional organizations of care farms, it is important to develop an effective network in the care sector. Our analysis shows how, in a similar institutional context, differences in strategies and entrepreneurial behavior can lead to diverging organizational identities and degrees of legitimacy. Strategy and identity have a recursive relationship. Differences in strategy can lead to diverging identities and differences in identity can lead to diverging strategies. Entrepreneurial behavior is the key to creating value with and extracting value from the context, building a trustful and attractive identity and gaining legitimacy.

## 3. Methods

We used entrepreneurship, organizational identity formation and legitimacy building as sensitizing concepts that merit further attention when describing and understanding the development of the regional organizations of care farms. Sensitizing concepts emerge when the observer discovers something worth problematizing, addressing the concept to the objects under investigation (Blumer, 1954). The data were collected in

2009 and 2010, in accordance with the principles of the case study approach (Yin, 2009). We used a dialectical approach, systematically combining empirical data and theoretical concepts, focussing on the interactions between the behavior and strategies of initiators of regional organizations of care farms, organizational attributes, their (changing) environment and the development and legitimacy of regional organizations (Hassink *et al.*, 2012). It is an exploratory study in which we selected two different examples of regional organizations.

A polar case selection was used, involving two contrasting examples of regional collaboration of care farmers. The two cases are BEZIG, located in the Dutch province of Gelderland, and Landzijde, in the province of Noord Holland. BEZIG is a collective initiative of existing care farmers, while Landzijde is the initiative of an individual entrepreneur. They are the oldest and largest regional organizations in the Netherlands and clear examples of the two types of organizations of care farmers that have been developing in the Netherlands.

In both cases, we followed the three main principles of data collection, which are favorable to the validity and reliability of case study findings: triangulation of data sources and methods for data collection, development of a case study database and maintenance of a chain of evidence (Yin, 2009). The information used to characterize the two organizations was based on annual reports and semi-structured interviews with the respective directors. The data include the development in terms of the number of farmers and clients involved, employees, annual turnover and collaborating organizations. For a broad perspective on the interaction between the identity of the organization, entrepreneurship, legitimacy in the care sector, context and the development of the organizations, we interviewed the directors of the organizations, a member of the board of advice or board of supervision and the client manager of the health insurance company with which the regional organizations have an AWBZ contract. The interviews took place in the summer of 2009 and were guided by our sensitizing concepts entrepreneurial behavior, organizational identity formation and legitimacy building. In the interviews, we focussed on organizational attributes and objectives, entrepreneurial skills and behavior, including perceived opportunities, strategies that were used to connect to the care sector, develop legitimacy and establish collaboration and their learning process. In the semi-structured interviews with the client manager of the health insurance company and the member of the board of advice or board of supervision, we asked for their experiences with the organization of care farms, focussing on the perceived identity and legitimacy and entrepreneurial behavior of the organizations. We also held a half-day session with the employees and initiators of the organizations in the autumn of 2008. In that session, and in the interviews with the director, we focussed on the characteristics and objectives of the organizations, the type of competences needed to develop the organization, the obstacles they had encountered and the strategies they had used to deal with them, organizational attributes that are important and interactions with health insurance companies and other organizations in the care sector and farmers.

When we conducted the interviews, BEZIG was undergoing a process of change. To gain insight into the changes involved, we decided to interview the board member of BEZIG who took the lead in the process of transforming BEZIG into a cooperation, and a member of the board of advice of BEZIG in November 2010 and March 2013. We conducted an additional interview with the director of Landzijde, to make sure the information was up to date. In all, we conducted 12 semi-structured interviews, which were recorded on audiotape and transcribed in full. The interviews and survey provide

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a good impression of the views and experiences of different types of actors who play an important role in the development and legitimacy of the regional organizations. As these actors reflect on the interactions between entrepreneurial behavior, organizational attributes, and characteristics and requirements of the (changing) field, the results enrich our understanding as to how these interactions affect the legitimacy and development of the two types of regional organizations.

Data analysis was an inductive, iterative process involving techniques and procedures proposed by Strauss and Corbin (1998). First, all transcripts and documents were re-read. Instead of using a pre-determined category scheme, themes were allowed to emerge from the subjects' own words, as recommended for exploratory research (Strauss and Corbin, 1998). Using a constant comparative method allowed us to simultaneously code and analyze the data, and to categorize them into developing themes representing recurring patterns of behavior and meaning. Once themes had been identified, we mined the data for representative elements. To maximize the interrelator reliability in the data analysis, the transcripts were double-coded and compared.

## 4. Results

In this section, we begin by describing the general development of the two regional organizations, followed by the main outcomes and the influencing factors, as identified in Section 2.

#### 4.1 General development

Based on the interview with the respective directors, the session with the employees and initiators of the two organizations, and annual reports, the general development of both organization has been reconstructed.

4.1.1 BEZIG. In the late 1990's some farmers, who were members of a farmers' study club, decided to set up a regional network of care farmers to exchange information and provide mutual support. In 2004, this resulted in an association called BEZIG. In 2005, they decided to apply for an AWBZ accreditation, which would give them access to regular AWBZ funds. They were not interested in delegating major tasks to BEZIG, since they had already established a certain degree of embeddedness in the care sector. They established a foundation, the most common form of AWBZ-accredited care organizations, and managed to obtain formal accreditation in 2006. The members elected some care farmers to become members of a board, which was to design and implement policy, while the decisions were to be made by the farmers themselves.

Because the foundation could not afford to pay a director's salary, it was decided to appoint a former alderman with a salary from his previous job as director, on a parttime basis. One of the care farmers provided administrative support. In 2007, some of the board members terminated their activities due to the high workload and a low level of involvement on the part of the members. Since then, the involvement of the members remained a subject of discussion. An administrative employee was appointed on a reintegration job, allowing the foundation to set up an office on one of the care farms. In 2009, this employee left with a burn-out due to the heavy workload. She was replaced by a former employee of the National Support Center Agriculture and Care. The province, funds and banks were approached unsuccessfully to support the professionalization of BEZIG. The process stagnated and the board of supervision warned that they would withdraw if the members failed to take greater responsibility. Two dedicated care farmers took the lead and replaced the former board members.

At that time, the financial situation of the foundation gradually improved and the director received a salary for 1.5 days per week. The farmers who took the lead invested heavily in the organization's development. They had a clear vision that transforming the foundation into a cooperative structure would increase member the involvement and stimulate individual and joint entrepreneurship of the farmers. The members of BEZIG agreed to transform the foundation into a cooperative of care farmers. The director was replaced by an employee with administrative expertise, as this was considered crucial. Initially, the director maintained all contacts with the health insurance companies. From now on, the leading farmers attended all the meetings with the health insurance companies. In response to the increase in turnover and working area, BEZIG appointed a new director in 2012 with adequate knowledge of the care sector and of financial and administrative procedures. The different stages in the development of BEZIG are shown in Table I.

4.1.2 Landzijde. The idea for Landzijde emerged in 1999, when a farmer involved in a regional agricultural nature organization recognized the lack of a matching organization for care services on farms. At that time, there were hardly any care farms in the region. The main initiator invested more than one year in the development of Landzijde, convinced that the concept would be a success. At the time, he was employed by the regional farmers nature organization and could use part of this time to invest in the development of Landzijde. He decided to set up a foundation with an AWBZ accreditation, first under the umbrella of the farmers nature organization and then as an independent foundation. He invited farmers to start providing care services under the umbrella of Landzijde. The farmers were not interested in developing care services themselves and were only embedded in the agricultural sector. The initiator realized that the combination of this relatively underdeveloped situation, the support from the province and the proximity of major cities provided a good opportunity for setting up a strong and professional organization. The number of care farmers increased rapidly and the AWBZ accreditation was obtained in 2003. The set-up of Landzijde was supported by the province, the city of Amsterdam and external funds. An important reason for supporting Landzijde was its contribution to the survival of farms and the openness of the landscape in a densely populated area of the country. In 2006, it received additional funding from the province, to implement and extend its model throughout the province, which made it possible to appoint regional

Characteristic Stages in development	2000 Start network	2004 Association	2006 Foundation and AWBZ accreditation	2007	2008	2009 Change of board and employees	2010 Start cooperative	2012
Number of farmers Number of clients Annual turnover			35	36 32	40 65	45 100	65 200	70 900
(× 1,000 euro) Number of employees (FTE) Number of			25	81 0.2	262 1.2	570 1.2	950 1.2	3,900 3.2
collaborating care institutions			0	0	0	0	0	1

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**Table I.** Stages in the development of BEZIG coordinators and a care coordinator. Landzijde initiated a large number of joint projects with other social care organizations (for instance in Amsterdam), and in 2012, Landzijde collaborated with 60 social care institutions. Since 2007, Landzijde has been involved in innovation programs supported by the Ministry of Agriculture, allowing the organizations, and initiate a number of innovative projects, including daycare activities for homeless people living in Amsterdam, financed by the municipality of Amsterdam, and reintegration trajectories for long-term unemployed inhabitants of Amsterdam, which resulted in an agreement with the organization responsible for the reintegration budgets. The revenues from these innovative services were considerable.

From 2015 onwards, day care services financed under the framework of the AWBZ were transferred to and financed by the municipalities. The collaboration between Landzijde and the city of Amsterdam was part of a national pilot project designed to support this transition, with participation of Amsterdam. Since 2011, the director and care coordinator of Landzijde have invested a great deal in contacts with municipalities. In 2012, Landzijde initiated educational trajectories for clients on the care farms. The city of Amsterdam appreciates this initiative as a way of stimulating the skills of clients and reducing the costs of care services. In 2013, Amsterdam launched a tender for daycare and reintegration activities. Landzijde is now one of the few selected organizations that provides services for the city of Amsterdam. While many of the traditional providers were not selected, Landzijde received over €400,000 to develop services for the city of Amsterdam. The main stages in the development of Landzijde are shown in Table II.

4.1.3 Increase in turnover. The major task for regional organizations is to obtain resources from the care sector, leading in turn to additional sources of income for diversifying farmers.

The annual turnover of BEZIG increased from €25,000 in 2006 to €570,000 in 2009. then to  $\notin$  950.000 in 2010 and  $\notin$  3.9 million in 2012. The number of farmers involved increased from 35 in 2006 to 45 in 2009 and 70 in 2012 (Table I). The growth in turnover in the last years comes from the increasing number of care farmers using the AWBZ accreditation of BEZIG and the change of personal budgets of clients (PGB; budgets that enable client to enter into direct contracts with care farms) into contracts with BEZIG. In 2010, the working area of BEZIG expanded, as care farmers from neighboring provinces decided to join the new cooperative. In the second part of 2010, PGB budgets were no longer available, due to the depletion of the national PGB budget. This led to an increased demand from farmers to use the contract of BEZIG. The annual turnover of Landzijde increased from €450,000 in 2005 to €3.9 million in 2009,  $\notin$ 4.9 million in 2010 and  $\notin$ 7.4 million in 2012, while the number of farmers increased from 54 to 100 (see Table II). The budgets obtained from the care sector, indicated by the annual turnover, increased faster for Landzijde than they did for BEZIG. In addition, the available budget per farmer was higher for Landzijde than it was for BEZIG. Another important difference was the greater diversity in terms of funding sources in the case of Landzijde, which not only managed to arrange contracts with health insurance companies, but also with the city of Amsterdam and reintegration firms. BEZIG only initiated contracts with health insurance companies.

#### 4.2 Differences in legitimacy, identity and entrepreneurial behavior

As we have seen, although they operated in similar contexts, the two organizations developed different strategies and also varied in their outcomes. In line with our

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JOCM 29,6	2012	Start education trajectories	97 955	8,200	20.0	60
982	2010	5	$100 \\ 760$	4,900	12.0	12
	2009 Stort	reintegration trajectories	102 700	3,900	7.0	11
	2008	Contract city of Amsterdam	102 590	2,700	5.7	11
	2007	0	85 430	1,950	4.5	6
	2006	Extension to entire province	68 260	1,200	2.4	4
	2004 2005	-	$54 \\ 190$	450	1.8	7
	2004			60		
	2003	Start AWBZ foundation accreditation				
	2001	Start foundation				
	1999	Business idea				
Table II.   Stages in the   development of   Landzijde	Characteristic	Stage in development	Number of farmers Number of clients	Annual turnover $(\times 1,000 \text{ euro})$	(DTE) (DTE) Number of	collaborating care institutions

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theoretical framework, we now discuss how this can be interpreted on the basis of differences in identity and how that expressed itself in the legitimization strategies and entrepreneurial behavior of the two respective organizations.

4.2.1 Organizational identity. The characteristics of an organization are an expression of its identity. An essential element of BEZIG's identity is that it had to limit its central coordination, and instead stimulate care farmers to develop their own entrepreneurship. Clients who are interested contact individual care farms and BEZIG is not involved in the matching process, and will only take care of the financing of the care service if that is what the farmer prefers. It has a contract with different health insurance companies in the province. In all, 85 percent of the budget is transferred to the farmers who provide the care services, while is used for the BEZIG office. In 2009, the central office consisted of one full-time care coordinator/secretarial support. Proposals were prepared by the board, which consisted of care farmers, and decisions were made by the members of the organization. The services of BEZIG involve exchanging experiences and information among care farmers, administrating AWBZ financed care and organizing education for farmers. BEZIG organizes two or three meetings per year for the care farmers. In 2010, some major changes were made that reflected and further underpinned its identity. The foundation was turned into a cooperative, owned by the farmers, to increase the involvement and entrepreneurship of the farmers. In addition, the working area of BEZIG was expanded. The new cooperative covers the central and eastern parts of the Netherlands (the provinces of Gelderland, Overijssel, Utrecht and Flevoland). This enables care farmers in the neighboring provinces to use BEZIG's AWBZ accreditation. The board members of the cooperative took some actions to professionalize the organization: a formal client organization and an annual monitoring of the satisfaction of clients on all member farms are being prepared. Members have to implement the quality system of the sector. At the start of the cooperative, all members had to pay an entry fee of €200 and an annual fee to use the electronic administrative system. To develop a more professional identity, in 2012, BEZIG appointed a new director with adequate knowledge of the care sector and of financial and administrative procedures.

The philosophy of Landzijde is that the farmers focus on agricultural production and providing services to the clients, while the organization takes care of all other tasks. It is an example of a corporate model with a central authority. Clients looking for a care farm contact the organization's central offices. A coordinator visits some of the care farms with potential clients, who can then select a farm. The foundation has contracts with different health insurance companies in the province. In all, 80 percent of the budget is transferred to the farmers who provide the care services, while the remaining twenty percent goes to Landzijde.

Landzijde has appointed a full-time director, care coordinators, administrative support and regional coordinators. Decisions are made by the managing director, the initiator of Landzijde. A board of commissioners is responsible for financial matters. Maintaining its client-oriented identity, and its associate focus on providing highquality care, Landzijde decided to include no farmers on its board, and the clients and farmers are represented in an advisory board. The services of Landzijde involve matching supply and demand with regard to care services on the farms at a regional level, as well as supporting and educating care farmers and clients; it organizes four network meetings a year, and has divided its working area into four regions, each of which has a coordinator is responsible for the intake of new clients and for matching

clients and farmers. In 2008, a client organization was installed to represent the interests of the clients. With support of the client organization, a new quality system was implemented which all farmers are obliged to use. It monitors the satisfaction, development and empowerment of individual clients.

4.2.2 Legitimacy in the care sector. The differences in identity discussed above also expressed themselves in the different approaches to achieving legitimacy. The interviews with players in the care field showed that the lack of legitimacy with regard to the concept of care farms and regional collaboration was not an issue among health insurance companies. Both health insurance client managers acknowledged that care farms offer a specific value to clients. "They offer space and quiet, less stress than the urban environment to which most clients are used. The focus is not on the clients' limitations, but on their possibilities. The care farms are important, because they increase the diversity of safe working facilities in society." In addition, they were positive about the fact that the care farmers are organized in a regional organization: "It is attractive to deal with one organization instead of individual care farms." The health insurance client managers have very different opinions about BEZIG and Landzijde, however, viewing BEZIG as an organization for the farmers: good when it comes to providing services to the farmers, but not innovative when it comes to providing care, and as an organization that is not very dynamic and does not take new initiatives. Landzijde, on the other hand, is seen as a very dynamic organization, with a focus on the needs of its clients, and as an organization with a diversity of services to meet client demands. This is in line with the vision of the director: "I have not developed Landzijde for the farmers, but for the clients. Therefore, farmers should not be on the board of the foundation." For the client manager, the organization Landzijde and the director are the same thing. He is very positive about the organization: "I appreciate that the director of Landzijde is a person with a good heart, an eye for developments in society and the needs of clients. I appreciate the flat organization, close to the client."

The mentality is also important. An organization where the director does not receive a huge salary. "Landzijde is well-organized and knows the ins and outs of the rules." Because he is so positive about the quality of the services that Landzijde offers and its innovativeness, he recommends Landzijde to other insurance companies, and in doing so he helps open doors for Landzijde. It became clear from the interviews that the regional organizations have to meet the requirements of the healthcare system. Initially, the regional organizations of care farms were given some credit, because they were new. In the last five years, however, the health insurance companies raised the standards and demanded proof of well-organized organizations with quality systems, improvement plans and client representation. In the case of BEZIG, these measures were not implemented very energetically, which earned them criticism from the health insurance companies: "They received some credit from us, because they are new, but it is still a bit amateurish and vulnerable. They can professionalize their office and should develop a central location. They get a lower tariff, because they do not meet all the requirements. They have no client organization. They have to develop a quality cycle with improvement plans and the client organization must give its opinion." This was confirmed by the director and board member. Landzijde has implemented all the measures and receives additional budgets from the health insurance company.

In both cases, procedures in the care sector are complex to outsiders. Due to a lack of funding, BEZIG hired people that did not have to receive a full salary. The director was a former alderman who still received salary from his previous job, and an employee

was hired who was on a reintegration trajectory. The lack of knowledge regarding the care sector resulted in serious mistakes, budget reductions and increasing pressure on the organization. The former director realized he lacked the necessary expertise and suggested to the board that they hire someone with a background in the care sector. Landzijde followed a different strategy. The director was approached by employees from the care sector who were inspired by his vision. He appointed experienced professionals. As he himself emphasized: "It is important to hire professionals with knowledge of the care sector. You need to have sufficient and broad knowledge. My experience is that this expertise is important in the contacts and negotiations with health insurance companies, as it generates credibility."

4.2.3 Entrepreneurial behavior. Entrepreneurship, defined as the promotion of opportunity-driven behavior, is a key factor in creating value with and extracting value from the context, building a trustful and appealing identity, and developing legitimacy. The regional organizations vary in their approach to entrepreneurship.

Individual or joint entrepreneurial behavior. Differences in identity also expressed themselves in different entrepreneurial behaviors, While BEZIG was designed to promote joint entrepreneurial behavior among care farmers, Landzijde can be characterized as an organization led by an individual entrepreneur, with a clear vision and commitment to providing high-quality care. The differences in these two strategies originate from their different starting points. The initial goal of BEZIG was to unite care farmers and develop an organizational structure for the cooperation, a process that was supported by the province. The focus was not on developing a market-oriented organization. The initiator of Landzijde, on the other hand, developed a market-oriented concept and then looked for farmers who were interested in joining the new organization. As a consequence, the focus of BEZIG was directed inwards, its aim being to develop a joint understanding among care farmers, while Landzijde was focussed on meeting the opportunities and regulations of the environment and extending the network in the care sector.

Some of the challenges that emerge when adopting a cooperative organizational structure were apparent in BEZIG, its philosophy being that the farmers are responsible for the development of the organization. The farmers elected some care farmers as board members to design and implement policy. BEZIG was struggling in its attempts to promote entrepreneurship, because creating joint entrepreneurial behavior was a problem. The client manager of the health insurance company stated that BEZIG lacks an entrepreneurial attitude. The director of BEZIG indicates that he has no time to be pro-active. He describes his situation as: "we are always behind the wave, instead of on the wave. I am always busy and there is no time to develop ideas or to approach other organizations." He also indicates that the organization's board members have to divide their attention between their own care farm and the regional organization. The workload became too much for the board members. The member of board of supervision we interviewed indicated the problem of inaction. None of the board members took any action when there were problems. He describes the main risks and current problems: "The fact that everyone is waiting for someone else to take responsibility is a great risk. In my view, a higher demand should be made on the farmers. They should take responsibility for the care delivery services of BEZIG."

The situation of BEZIG changed rapidly from 2009 onwards and a few new board members took the lead. When we interviewed one of them in 2010 and again in 2013, he indicated that, after the crisis in 2008, something needed to be done. He decided to

invest in the organization, as his care farm was well-established. He reasoned that his care farm would benefit from a successful regional organization of care farmers. He became a leading person not only in BEZIG, but also at a national level. He recognized the need to invest in the relationship with the health insurance companies, in knowledge of administrative systems and in the implementation of quality systems and client organizations. He describes how his network developed through his activities at a national level and how his previous job as an adviser and project developer proved to be very useful. His national contacts with the health insurance company proved useful in settling a conflict with one of their offices. He used his long-standing contacts with the youth care institution to initiate a joint project between them and BEZIG. He is convinced that the transformation into a cooperative will increase the involvement of the farmers because they are not only members but also invest financially in the organization.

In the case of Landzijde, farmers are not expected to be actively involved in the development of the organization. The director, who is considered a genuine entrepreneur, took the lead in developing a professional organization and strategies for its external operation. He indicates that "you need to have a good and trustworthy story. You should have an urge to perform and to learn, like a thirsty sponge." In his view, the focus needs to be on what clients need. "You have to find out where the demands are, then you should be direct and concrete, being a bit bold. You should not invest in care organizations that are not ambitious." In addition, it is important to build credibility toward the care sector and the health insurance companies, by hiring professionals with knowledge of the care sector. He also thinks about strategies toward the health insurance company: "This year, we proposed a lower rate than the health insurance company offered. That way, we can offer care to a larger number of clients on our farms." The health insurance company was so positive about this unconventional approach that they offered Landzijde an additional budget of €550,000.

Thanks to his behavior and vision, he managed to secure a strong support from the health insurance company. Political action was also important. The director of Landzijde managed to connect his ideas to stakeholders values: the city of Amsterdam was eager to sustain an open agricultural landscape around Amsterdam. Landzijde indicated that, thanks to their new care activities, farmers would generate additional income and be able to continue farming. The province wanted one organization for care farming; the proposal of Landzijde to organize this sector for the entire province was supported, which in turn generated more financial support. The ability to connect two different worlds (agriculture and healthcare) was also important. According to the advisor of Landzijde, its director has learned to sell his concept and organization to the care sector, by connecting the concept to their changing priorities, like empowering clients and providing community care.

*Network orchestration.* Developing and managing a network in the care sector is an important entrepreneurial task for the regional organizations. BEZIG mainly invested in internal developments and, until recently, it did not develop a network in the care sector. The relationship with the health insurance companies was not always a happy one. The previous director indicated that he found it difficult to deal with the rules of the health insurance company and that it took a lot of energy to obtain contracts. Landzijde built an extensive network in the care sector and made effective use of that network to increase existing markets and develop new markets, including providing services to homeless and unemployed people in Amsterdam. It attracted an adviser of

the City of Amsterdam and involved employees of care institutions and psychologists in the organization to increase its legitimacy and quality.

For Landzijde, the collaboration with Streetcornerwork, an organization for homeless people in Amsterdam, was important. With their collaboration, they were able to develop an innovative service: day care for homeless people on the farms of Landzijde. The director of Landzijde learned from his contacts with Streetcornerwork that farmers could provide a valuable service that was attractive both to Streetcornerwork, which managed to expand its services, and to the city of Amsterdam, which wanted to reduce the amount of problems caused by homeless people and offer them more perspective. Collaboration with reintegration firms and the education sector enabled Landzijde to initiate reintegration and educational services. The alliance with innovation programs and research organizations was also relevant. The Landzijde case shows the importance of engaging in ongoing network activities. The innovative character of Landzijde, based on new activities in collaboration with partners in the reintegration and educational sector. was a major reason for Amsterdam to select the organization as one of the providers of social services in the coming years. The involvement in innovation programs resulted in additional resources, new insights and a broader network, as well as increasing the credibility of Landzijde and its director, giving him the opportunity to spend time looking for new business opportunities. All these examples show the positive impact of linking an organization to the objectives of stakeholders in the environment and developing effective networks and alliances. Table III provides an overview of the main differences between BEZIG and Landzijde.

### 5. Discussion and conclusions

The aim of our study was to explore how, in times of change in institutional logics, emergent strategies to establish regional organizations of care farms unfold. We have shown how different strategies are both reflecting and constituting organizational identity and lead to different degrees of legitimacy, contrasting kinds of entrepreneurial behavior and different access to budgets in the care sector. In other words, we have seen that the relation between identity formation and strategy is recursive. The desired identity of the regional organization affects its strategy whereas strategic behavior influences identity. Our study shows the importance of establishing an organization with a professional and appealing identity, leading to institutional and innovative legitimacy. Entrepreneurship, in the sense of promoting opportunity-driven behavior, is crucial in devising and implementing a successful strategy. Landzijde shows the advantage of central authority and a clear entrepreneurial vision, while BEZIG shows the drawbacks and risks of having no clear leading entrepreneur. Developments occurred more by fits and starts, and board members faced the challenge of getting care farmers involved and persuading them to take responsibility. The risks involved in this model are the (excessively) high demands on board members, an ineffective use of resources due to changing objectives, limited interaction with the environment and limited progress, due to a focus on consulting members and reaching a consensus, and a lack of professional support. As a result, insufficient resources became available and it was difficult to develop an organization with a professional identity.

Our study shows the importance of network orchestration, strategically establishing networks in terms of securing resources, discovering and creating opportunities, and gaining legitimacy in the agricultural and care sectors (Elfring and Hulsink, 2007). In the initial phase, Landzijde developed a completely new network in the care sector which Identity formation and strategy development

JOCM 29,6		BEZIG	Landzijde		
23,0	Background/context	Care farmers unite and initiate organization	Entrepreneur initiates a foundation and looks for farmers to work under the umbrella of the foundation		
988	Entrepreneurial behavior	Less visible, distributed among board of farmers	Visible in person of director		
		Dividing attention between own farm and BEZIG	Fully focussed on Landzijde		
		Following developments	Pro-active		
	Network structure	<b>x · ·</b> · <b>x</b>			
	Network care sector	Limited No	Extensive Yes		
	Alliances with care partners Involved in innovation	No	Yes		
	programs	NO	165		
	Organizational attributes				
	Approach	Limited central coordination	Matching supply and demand at a regional level		
	Acquisition clients	Joint entrepreneurship of farmers	Strong central coordination and leadership		
		Clients contact individual farms	Clients contact central		
	Position of farmers	Owners	organization		
	Board	Farmers	Subcontractors, advisers		
	Professional organization Freedom for farmers	Not vet	External experts Yes		
	Match with demands from	Freedom in degree of involvement	Strict rules		
	health insurance companies	Not completely	Yes		
	Identity	For the farmers	Focus on clients		
Table III.	-	Internal oriented	External oriented		
Main differences		Following developments	Innovative		
between BEZIG and		Struggling to meet institutional	Dealing with institutional		
Landzijde		demands	demands in pro-active way		

resulted in some strong ties and alliances with care partners (e.g. Streetcornerwork) which had adopted a similar logic. The director of Landzijde had a clear strategy, investing only in alliances with care institutions that were beneficial to Landzijde. At the same time, Landzijde continued to invest in new ties, such as research organizations, innovation programs, reintegration and educational partners that provided legitimacy and resources. Because its innovative character matched the desired changes in the care sector, its institutional legitimacy and the effective network orchestration of the director, the centrality and status of Landzijde in the care and reintegration sector increased. By investing in strategic alliances and learning about the boundaries of opportunities of new services, Landzijde not only discovered but also created new business opportunities, like the provision of reintegration services. This ongoing entrepreneurial and legitimacypromoting behavior resulted in the recent success involving the tender of the city of Amsterdam, which further strengthened the organization, which was an important precondition for gaining institutional legitimacy among health insurance companies.

The strategies of the two regional organizations were expressed in different identities, which affected their legitimacy in the care sector. The identities were created in interaction with insiders and outsiders (Clegg et al., 2007). The identity of an organization should be consistent with institutional prescriptions to avoid resistance (Gioja *et al.*, 2013) and be outstanding to generate prestige (Navis and Glvnn, 2010). The director of Landzijde successfully managed to frame the organization as innovative and professional with a focus on client needs. Developing a positive identity and legitimacy required entrepreneurial agency and institutional work. Our study shows the importance of establishing both institutional and innovative legitimacy (De Clercq and Voronov, 2009). The director of Landzijde developed a professional organization that is compatible with the rules and expectations of the care sector (institutional legitimacy). In addition, he framed Landzijde as being outstanding (innovative legitimacy) by presenting Landzijde as an innovative flat organization with a dedicated director and a focus on customer requirements. This was in line with the logics adopted by the health insurance companies. The director and employees of the organization carefully framed this identity in their contacts with external organizations. This confirms results of earlier studies, that it is important to develop a trustful and appealing identity for key stakeholders (Maguire and Hardy, 2005). Our study has shown how newcomers managed to establish such an identity by institutional entrepreneurial behavior and how this is linked to institutional and innovative legitimacy. Thanks to this successful institutional and innovative legitimacy, the health insurance company and the City of Amsterdam strongly supported the development of the organization. It shows that both the institutional skills to create formal arrangements with funding organizations and establish and run a professional organization and the more entrepreneurial skills, like opportunity-based behavior, are important to the development of the organization.

Our study illustrates that there are regional differences in context. An organization like Landzijde, with a central authority with ultimate decision-making powers, was only able to develop in provinces where the number of care farmers was limited. In this situation, there was room to attract and provide services for farmers who did not yet provide care services. The director of Landzijde approached farmers who were not interested in developing the care services themselves. Landzijde offers a clear added value to these farmers, who would otherwise not have started providing care services. Landzijde provides them with clients and access to AWBZ funding, resources to which the farmers themselves have no access. In provinces with larger numbers of care farmers, regional organizations are set up by existing care farmers who are not in favor of outsourcing too many services to a regional organization.

Although the development of Landzijde is a success story, in most regions, care farmers do not want to copy its model. In national meetings, representatives of other regional organizations of care farms have stated that they felt that an organization of care farms should be a cooperative organization that is owned by the care farmers themselves. They also criticized the Landzijde model by arguing that genuine entrepreneurs do not need an organization like Landzijde and can even be hampered by it. This illustrates the difference in logics adopted by most farmers and Landzijde.

To summarize, we have analyzed the development and unfolding of strategies of two different types of regional organizations of care farms to support diversifying farmers with the development of care services on their farms. The initiators used different strategies, which were expressed in contrasting organizational identities and degrees of legitimacy. The Landzijde model is based on the entrepreneurial behavior and institutional work of its director, expressed as a continuous process of opportunity identification and opportunity-based behavior and development of a professional

organization. This is attractive to farmers who like to outsource tasks to a regional organization. The initiator recognized the lack of time and knowledge among farmers to operate in the care sector. This clear opportunity identification resulted in a corporate model, where farmers focus on farming and providing services to their clients on the farm and outsourcing the acquisition of clients to the regional organization. The second model, BEZIG, is a cooperative model based on consensus and joint ownership. In this model, central coordination is limited and due to lack of leading entrepreneurship more obstacles are encountered. The evolution of the two strategies can be explained by looking at the differences in the regional context. The director of Landzijde cleverly benefited from a situation where farmers interested in care farming had not yet developed contacts with care organizations and benefited directly from the regional organization.

In the tightly institutionalized care sector, it is important to establish a professional and appealing organization that matches the demands of the sector and that is also innovative. The ability to present an organization as being innovative is important when it comes to gaining access to funding and making the organization a more attractive candidate for alliances with other stakeholders. Developing institutional and innovative legitimacy is a crucial element in a strategy designed to become successful regional organizations of care farms, newcomers in the institutionalized care sector. It involves combining two types of logics: innovation and liberalization (expressions of an entrepreneurial logic) and quality and accountability of care services (expressions of an institutional logic). It illustrates how committed and strategically operating institutional entrepreneurs, making use of opportunities resulting from external pressures on the care sector and connecting to stakeholder values, can establish a strong position within an institutionalized sector.

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